



# Permit Revision

**Town of Herndon – Building Inspections**  
 777 Lynn Street 2<sup>nd</sup> Floor, Herndon, VA 20170  
 Telephone (703) 435-6850 Fax (703) 318-8492  
 E-Mail: [buildinginspections@herndon-va.gov](mailto:buildinginspections@herndon-va.gov)

Original Permit Number \_\_\_\_\_

<i>Job Location</i>	<i>Street Address</i> _____	<i>Type of Revisions</i> _____
	<i>Lot No.</i> _____	
<i>Owner Information</i>	<i>Name</i> _____	<i>Reason For Revisions</i> _____
	<i>Address</i> _____	
	<i>City</i> _____ <i>State</i> _____	
<i>Architect/ Engineer</i>	<i>Name</i> _____	_____
	<i>Address</i> _____	
	<i>City</i> _____ <i>State</i> _____	
<i>Contractor</i>	<i>Phone No.</i> _____	<i>Number of Pages</i> _____
	<i>Name</i> _____	
	<i>Address</i> _____	
	<i>City</i> _____ <i>State</i> _____	
	<i>State Reg. No.</i> _____	<i>Contact Email:</i> _____

I hereby certify that I have the authority to make this application, that the information given is correct, and that use and construction shall conform to the County Health Regulations, the Building and Zoning Ordinances, and private deed restrictions, if any, which are imposed on the property.

\_\_\_\_\_ *Contact Name & Signature*                      \_\_\_\_\_ *Contact Telephone Number*                      \_\_\_\_\_ *Date of Submission*